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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Bring iden	e the name that is on government-issued ure identification (for nple, your driver's use or passport). g your picture tification to your meeting the trustee.	Christine First name m. Middle name Rudnicki Last name and Suffix (Sr., Jr., II, III)	in arthur First name j, Middle name rudnicki Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-3186	xxx-xx-9691

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Debtor 1 Debtor 2

Rudnicki, Christine m. & rudnicki, arthur j,

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		3699 n. Alder Drive Hoffman estates, il	3699 N Alder Dr Hoffman Estates, IL 60192-1569			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook	Cook			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I	Check one:			
		have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Debtor 2

Rudnicki, Christine m. & rudnicki, arthur j,

7.	The chapter of the Bankruptcy Code you are	Check or 2010)). A	U.S.C. § 342(b) for Individuals Filing for Bankruptcy (For			
	choosing to file under	■ Chap	ter 7			
		☐ Chap	ter 11			
		☐ Chap	ter 12			
		☐ Chap	eter 13			
3.	How you will pay the fee	ab	out how yo	u may pay. Typically ey is submitting your	, if you are paying the fee yours	with the clerk's office in your local court for more details elf, you may pay with cash, cashier's check, or money ord ttorney may pay with a credit card or check with a
		□ In	eed to pay	y the fee in installn		sign and attach the Application for Individuals to Pay The
			•	<i>Installments</i> (Official at my fee he waived	,	only if you are filing for Chapter 7. By law, a judge may, bu
		no yo	t required t ur family si	o, waive your fee, ar ze and you are unab	d may do so only if your income	e is less than 150% of the official poverty line that applies to a less than 150% of the official poverty line that application and the second section is less than 150% of the official poverty.
).	Have you filed for bankruptcy within the last 8 years?	■ No.				
			District		When	Case number
			District		When	Case number
			District		When	Case number
0.	Are any bankruptcy cases pending or being filed by	■ No				
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
1.	Do you rent your residence?	■ No.	Go to	line 12.		
	residence:	☐ Yes.	Has yo	our landlord obtained	an eviction judgment against yo	ou and do you want to stay in your residence?
				No. Go to line 12.		
				Yes. Fill out Initial S	Statement About an Eviction Ju	dgment Against You (Form 101A) and file it with this

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Debtor	1	
D - I. (^	

Rudnicki, Christine m. & rudnicki, arthur j,

Part	Report About Any Bus	sinesses Y	ou Own	as a Sole Proprieto	r			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of busi	ness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	er, Street, City, State	e & ZIP Code			
	to this petition.		Chec		to describe your business:			
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))			
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))			
				None of the above				
If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set approprious deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure operations. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor so that it can set appropriate that you are a small business debtor you must attach your most recent balance sheet, statement appropriate that you are a small business debtor you are a small business debtor.					small business debtor, you must attach your most recent balance sheet, statement of			
	For a definition of small	■ No.	I am not filing under Chapter 11.					
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am f	iling under Chapter 1	I1 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention			
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable	■ No.	What is	the hazard?				
	hazard to public health or safety? Or do you own		If improve	liata attention is				
	any property that needs immediate attention?			liate attention is why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is	s the property?				
					Number, Street, City, State & Zip Code			

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Debtor 1 Debtor 2

Part 5:

Rudnicki, Christine m. & rudnicki, arthur j,

Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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_						_	

Rudnicki, Christine m. & rudnicki, arthur j,

16.	What kind of debts do	16a.				defined in 11 U.S.C.§ 101(8) as "incurred by a	n		
	you have?		individual primarily for a personal, family, or household purpose."						
			□ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily busin for a business or investment or the			ebts that you incurred to obtain money s or investment.			
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe the	nat are not consume	r debts or busin	ness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. 0	Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do yo paid that funds will be available to			roperty is excluded and administrative expenses	are		
	administrative expenses		■ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-50,000			
	you estimate that you owe?	□ 50-99		5001-10,000		50,001-100,000			
	one.	<u> </u>		☐ 10,001-25,00	00	☐ More than100,000			
		200-9	99						
19.	How much do you	□ \$0 - \$50,000		□ \$1,000,001 -	\$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million		□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000	□ \$50,000,001 □ \$100,000,00					
		₩ \$500,0	001 - \$1 million	\$100,000,00	1 - \$500 Hillion	in in wore than \$50 billion			
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 -	\$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001		\$1,000,000,001 - \$10 billion			
			001 - \$500,000	□ \$50,000,001 □ \$100,000,00					
		\$ 500,0	001 - \$1 million	— \$100,000,00	1 - \$500 million	More than \$50 billion			
Part	7: Sign Below								
For	you	I have exa	amined this petition, and I declare	under penalty of perj	ury that the info	ormation provided is true and correct.			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
			ney represents me and I did not pa ined and read the notice required I			not an attorney to help me fill out this document,	I		
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
		case can				y or property by fraud in connection with a banki both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	uptcy		
		Christin	ne m. Rudnicki e of Debtor 1		arthur j, ruc Signature of D	dnicki	_		
		Executed	on February 3, 2017 MM / DD / YYYY		Executed on	February 3, 2017 MM / DD / YYYY	_		

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Debtor 1 Debtor 2	Rudnicki, Christi	Document ne m. & rudnicki, arthur j,	Page 7 of 67	Case number (if known)	
•	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this per Chapter 7, 11, 12, or 13 of title 11, United States	s Code, and have expla	ained the relief available un	der each chapter for which the

If you are not represented by an attorney, you do not need to file this page.

Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ James M. Kelly	Date	February 3, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
James M. Kelly		
Printed name		
Law Offices of James M. Kelly		
Firm name		
440 N Noviburget Hung		
119 N Northwest Hwy		
Palatine, IL 60067-5324 Number, Street, City, State & ZIP Code		
Hamber, Street, Ony, State & Zii Sode		
Contact phone	Email address	jkellylaw94@yahoo.com
Bar number & State		

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		Docume	ent Page 8 of 67	7	-	
Fill in this infor	mation to identify your	case:				
Debtor 1	Christine m. Rud	nicki				
	First Name	Middle Name	Last Name)	
Debtor 2	arthur j, rudnicki					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS, EASTERN DI	IVISION		
Case number _					☐ Check if	thic ic
					amended	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

this is an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

	t 1: Summarize Your Assets		
rai	Summarize Four Assets	Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	315,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,600.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	322,600.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	427,335.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	88,631.37
	Your total liabilities	\$	515,966.37
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	4,435.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,430.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your of	her schedi	ules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a p purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	ersonal, fa	mily, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this bo	x and sub	mit this form to the

court with your other schedules.

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Debtor 1
Debtor 2
Rudnicki, Christine m. & rudnicki, arthur j,

Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,600.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debtor 1 Christine m. Rudnicki First Name Middle Name Last Name Middle Name Last Name Debtor 2 arthur j, rudnicki First Name Middle Name Last Name United States Bankruptcy Court for the: MORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number Check i amende Offficial Form 106A/B Schedule A/B: Property ne ach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category withink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if knownswer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Sirgel-damily home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Current value of the entire property? Current value of the entire property? Describe caches it available, or other description Current value of the entire property? Describe the entire property? Describe the entire property?	12/15 ere you
Debtor 2 (Spouse, if filing) Thirty j, rudnicki First Name Middle Name Last Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number Check i amende Official Form 106A/B Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category withink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct nformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if knowser every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Do not deduct secured claims or exempting the amount of any secured claims or exempting condominium or cooperative Manufactured or mobile home Current value of the	d filing 12/15 ere you
Debtor 2 (Spouse, if filing)	d filing 12/15 ere you
Case number Check is amended Official Form 106A/B Schedule A/B: Property neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category withink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (iff knownswer every question. Part 12 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Do not deduct secured claims or exempting the amount of any secured claims or exempting the amount of any secured claims on Schrored Condominium or cooperative Manufactured or mobile home Current value of the Curren	d filing 12/15 ere you
Official Form 106A/B Schedule A/B: Property n each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category withink it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct nformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known and the complete of the control of th	d filing 12/15 ere you
Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category whink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2.	ere you
hink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Do not deduct secured claims or exempting the amount of any secured claims on Schale Condominium or cooperative Manufactured or mobile home Current value of the Current value	-
Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Current value of the Current value of the	
Tyes. Where is the property? What is the property? Check all that apply Single-family home Do not deduct secured claims or exemption the amount of any secured claims on Schroen Creditors Who Have Claims Secured by It Manufactured or mobile home What is the property? Check all that apply Single-family home Do not deduct secured claims or exemption the amount of any secured claims on Schroen Creditors Who Have Claims Secured by It Manufactured or mobile home Current value of the Current value	
1.1 What is the property? Check all that apply Single-family home	
3699 N Alder Dr Street address, if available, or other description Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Current value of the Current value	
3699 N Alder Dr Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Current value of the Current value	
Street address, if available, or other description Condominium or cooperative Manufactured or mobile home Current value of the Current value	edule D:
Current value of the Current value	roperty.
_ · · · · · · · · · · · · · · · · · · ·	5,000.00
Timeshare Other Other Who has an interest in the property? Check one Describe the nature of your ownership (such as fee simple, tenancy by the en a life estate), if known.	
Debtor 1 only Tenancy by the Entirety	
cook □ Debtor 2 only	
County Debtor 1 and Debtor 2 only Check if this is community proper	.y
☐ At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number:	
2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

you have attached for Part 1. Write that number here......>>

\$315,000.00

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Case 17-03179 Doc 1 Filed 02/03/17 Entered 02/03/17 11:28:13 Desc Main Document Page 11 of 67 Debtor 1 Rudnicki, Christine m. & rudnicki, arthur j, Case number (if known) Debtor 2 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Do not deduct secured claims or exemptions. Put **Ford** Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: **Escort** Debtor 1 only Model: Creditors Who Have Claims Secured by Property. 1998 Debtor 2 only Year: Current value of the Current value of the ■ Debtor 1 and Debtor 2 only Approximate mileage: entire property? portion you own? Other information: ☐ At least one of the debtors and another \$500.00 \$500.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put 3.2 Make: Buick Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Regal Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2001 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: ■ Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$2,500.00 \$2,500.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$3.000.00 .you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... household furnishings \$2,000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$500.00 television 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No

☐ Yes. Describe.....

Page 12 of 67 Document Debtor 1 Rudnicki, Christine m. & rudnicki, arthur j, Case number (if known) Debtor 2 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... clothing \$1,000.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for \$3.500.00 Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No \$100.00 cash 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... checking and savings \$1,000.00 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes.....

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Page 13 of 67 Document Debtor 1 Rudnicki, Christine m. & rudnicki, arthur j, Case number (if known) Debtor 2 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements \square Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information.....

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Debto Debto	Dudwieki Christin	e m. & rudnio		Case number (if known)	
E ■	unpaid loans you m No	bility insurance p nade to someone		ts, sick pay, vacation pay, workers' compensat	ion, Social Security benefits;
	Yes. Give specific information	٦			
<i>E</i>	No	life insurance; he		SA); credit, homeowner's, or renter's insurance	
Ц	Yes. Name the insurance com C	npany of each po company name:	licy and list its value.	Beneficiary:	Surrender or refund value:
lf	ed.			d rance policy, or are currently entitled to receive p	property because someone has
	Yes. Give specific information	٦			
E	xamples: Accidents, employn	nent disputes, in		or made a demand for payment to sue	
	No		every nature, including	counterclaims of the debtor and rights to s	eet off claims
	Yes. Describe each claim				
	· - -				
Ц	Yes. Give specific information	٦			
	Add the dollar value of all of Part 4. Write that number he			y entries for pages you have attached for	\$1,100.00
Part 5	Describe Any Business-Rela	nted Property You	Own or Have an Interest	In. List any real estate in Part 1.	
_	you own or have any legal or e	equitable interest	in any business-related pr	roperty?	
	o. Go to Part 6. es. Go to line 38.				
Part 6	Describe Any Farm- and Cor If you own or have an interest			n or Have an Interest In.	
	you own or have any legal No. Go to Part 7.	or equitable in	terest in any farm- or c	ommercial fishing-related property?	
	Yes. Go to line 47.				
Part 7	Describe All Property Y	ou Own or Have	an Interest in That You Dic	d Not List Above	
	you have other property o xamples: Season tickets, cou				
	Yes. Give specific information				
54. <i>I</i>	Add the dollar value of all of	f your entries fr	om Part 7. Write that nu	ımber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Debtor 1
Debtor 2
Rudnicki, Christine m. & rudnicki, arthur j,

Case number (if known)

Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$315,000.00
56.	Part 2: Total vehicles, line 5	\$3,000.00		_
57.	Part 3: Total personal and household items, line 15	\$3,500.00		
58.	Part 4: Total financial assets, line 36	\$1,100.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$7,600.00	Copy personal property total	\$7,600.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$322,600.00

Official Form 106A/B Schedule A/B: Property page 6

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		Document	Page 16 of 67	-
Fill in thi	s information to identify your ca	ase:		
Debtor 1	Christine m. Rudn	Middle Name	Last Name	
Debtor 2	Tildervanio	Wilddio Name	Last Name	
(Spouse if, f	iling) First Name	Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS, EASTERN DIVISION	
Case nur (if known)	nber			Check if this is an amended filing
Officia	al Form 106C			
Sche	edule C: The Pro	perty You Cla	im as Exempt	4/16
property yo	ou listed on Schedule A/B: Proper	ty (Official Form 106A/B) as yo	gether, both are equally responsible for super source, list the property that you claim accessary. On the top of any additional page	as exempt. If more space is needed, fill
applicable unds—m o a particable	e statutory limit. Some exemption ay be unlimited in dollar amour	ons—such as those for healt it. However, if you claim an e le of the property is determin	Ill fair market value of the property being the aids, rights to receive certain benefit exemption of 100% of fair market value ned to exceed that amount, your exemples.	s, and tax-exempt retirement under a law that limits the exemption
1. Whic	h set of exemptions are you cla	iming? Check one only, even	if your spouse is filing with you.	
■ Yo	ou are claiming state and federal no	nbankruptcy exemptions. 11	U.S.C. § 522(b)(3)	
☐ Yo	ou are claiming federal exemptions.	11 U.S.C. § 522(b)(2)		
2. For a	ny property you list on Schedu	le A/B that you claim as exer	mpt, fill in the information below.	
	description of the property and line dule A/B that lists this property	on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	1 Exemptions			
	description: from <i>Schedule A/B</i> :			
			☐ 100% of fair market value, up to any applicable statutory limit	
(Subj ■ □	No	very 3 years after that for case	es filed on or after the date of adjustment.) n 1,215 days before you filed this case?	

Yes

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					-
Fill in	this informa	tion to identify your case:			
Debto	or 1	First Name	Middle Name	Last Name	
Debto	or 2	arthur j, rudnicki	Middle Name	Lastivanie	
(Spouse	e if, filing)	First Name	Middle Name	Last Name	
United	d States Bank	ruptcy Court for the: NC	ORTHERN DISTRICT OF	ILLINOIS, EASTERN DIVISION	
Case	number				
(if know	vn)				☐ Check if this is an amended filing
∩ffi	cial For	m 106C			-
				. – .	
Scr	nedule	C: The Prope	erty You Cla	im as Exempt	4/16
propert	ty you listed or d attach to this	n Schedule A/B: Property(O	official Form 106A/B) as yo	gether, both are equally responsible for sup our source, list the property that you claim as occessary. On the top of any additional pages	s exempt. If more space is needed, fill
funds- to a pa	—may be unl articular dolla able statutor	imited in dollar amount. H ar amount and the value of	owever, if you claim an of the property is determi	th aids, rights to receive certain benefits exemption of 100% of fair market value ned to exceed that amount, your exemp	under a law that limits the exemption
1. W		· ·	-	if your spouse is filing with you.	
_	_	ning state and federal nonba			
_	_	-		0.3.C. § 322(b)(3)	
L	J You are clain	ning federal exemptions. 11	U.S.C. § 522(b)(2)		
2. F (or any prope	rty you list on Schedule A.	/B that you claim as exer	mpt, fill in the information below.	
		of the property and line on at lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
Debt	or 2 Exemp	otions_			
	rief description ine from Sche			o	
LII	ine nom sche	uule A/D.		100% of fair market value, up to any applicable statutory limit	
		ng a homestead exemptio			
(8	Subject to adju ■ No	stment on 4/U1/19 and every	s years arter that for case	es filed on or after the date of adjustment.)	
	-	ou acquire the property covo	red by the exemption within	n 1,215 days before you filed this case?	
_	res. Did y	ou acquire the property cove	Tod by the exemption within	11,210 days before you filed this case?	
	☐ Yes				

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Fill in this informa	ation to identify your	case:			
Debtor 1	Christine m. Rud	dnicki Middle Name Last Name			
Debtor 2	arthur j, rudnick			. (
(Spouse if, filing)		Middle Name Last Name			
United States Banl	kruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EAST	ERN DIVISION		
Case number				_	if this is an led filing
Official Form	106D				
Schedule [D: Creditors	Who Have Claims Secure	d by Propert	У	12/15
		two married people are filing together, both are eq number the entries, and attach it to this form. On t			
1. Do any creditors h	nave claims secured by	your property?			
☐ No. Check t	this box and submit this	s form to the court with your other schedules. You	have nothing else to re	port on this form.	
■ Yes. Fill in a	all of the information be	low.			
Part 1: List All	Secured Claims				
•		ore than one secured claim, list the creditor separately	Column A	Column B	Column C
		a particular claim, list the other creditors in Part 2. As all order according to the creditor 's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Cach LLC		Describe the property that secures the claim:	\$7,250.00	\$315,000.00	\$7,250.00
Creditor's Name		3699 N Alder Dr, Hoffman Estates, IL 60192-1569			
Chicago, II	Bonewicz ans St Ste 300 L 60654-1607 City, State & Zip Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
Who owes the deb	at? Check one	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as mortgage or sec car loan)	cured		
■ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the ☐ Check if this claim community deb		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incur		Last 4 digits of account number			
2.2 charter On	ie	Describe the property that secures the claim:	\$47,000.00	\$0.00	\$47,000.00
Creditor's Name					
Asset Reco PO Box 42 Providence 02940-202	e, RI	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, 0	City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as mortgage or sec car loan)	cured		
Debtor 1 and Deb	=	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the ☐ Check if this claic community deb		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incur	rred	Last 4 digits of account number			

Official Form 106D

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Debtor 1 Christine m. Rudnicki First Name Middle N	lame Last Name	Case number (f know)		
Debtor 2 arthur j, rudnicki				
First Name Middle N	lame Last Name			
2.3 citibank	Describe the property that secures the claim:	\$50,000.00	\$315,000.00	\$50,000.00
Creditor's Name	3699 N Alder Dr, Hoffman Estates, IL 60192-1569		· · · · · ·	
PO Box 769013 San Antonio, TX 78245-9013	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or sec car loan)	cured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.4 wells fargo	Describe the property that secures the claim:	\$323,085.00	\$315,000.00	\$8,085.00
Creditor's Name	Describe the property that secures the claim: 3699 N Alder Dr, Hoffman Estates, IL 60192-1569	\$323,085.00	\$315,000.00	\$8,085.00
	3699 N Alder Dr, Hoffman Estates, IL 60192-1569 As of the date you file, the claim is: Check all that apply.	\$323,085.00	\$315,000.00	\$8,085.00
PO Box 5296 Carol Stream, IL	3699 N Alder Dr, Hoffman Estates, IL 60192-1569 As of the date you file, the claim is: Check all that apply. □ Contingent	\$323,085.00	\$315,000.00	\$8,085.00
PO Box 5296 Carol Stream, IL 60197-5296	3699 N Alder Dr, Hoffman Estates, IL 60192-1569 As of the date you file, the claim is: Check all that apply.	\$323,085.00	\$315,000.00	\$8,085.00
Creditor's Name PO Box 5296 Carol Stream, IL 60197-5296 Number, Street, City, State & Zip Code	3699 N Alder Dr, Hoffman Estates, IL 60192-1569 As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed		\$315,000.00	\$8,085.00
Creditor's Name PO Box 5296 Carol Stream, IL 60197-5296 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	3699 N Alder Dr, Hoffman Estates, IL 60192-1569 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or see		\$315,000.00	\$8,085.00
Creditor's Name PO Box 5296 Carol Stream, IL 60197-5296 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	3699 N Alder Dr, Hoffman Estates, IL 60192-1569 As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or sec car loan)		\$315,000.00	\$8,085.00
Creditor's Name PO Box 5296 Carol Stream, IL 60197-5296 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a	3699 N Alder Dr, Hoffman Estates, IL 60192-1569 As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or sec car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit		\$315,000.00	\$8,085.00
Creditor's Name PO Box 5296 Carol Stream, IL 60197-5296 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	3699 N Alder Dr, Hoffman Estates, IL 60192-1569 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number	cured		\$8,085.00
Creditor's Name PO Box 5296 Carol Stream, IL 60197-5296 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	3699 N Alder Dr, Hoffman Estates, IL 60192-1569 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number		<u> </u>	\$8,085.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	0030 17 00173	Document Document	Page 20 of 67	ocoo mani
Fill in tl	his information to identify yo			
Debtor	1 Christine m. R	udnicki		
D OD (O)	First Name	Middle Name	Last Name	
Debtor 2	<u> </u>			
(Spouse if	f, filing) First Name	Middle Name	Last Name	
United S	States Bankruptcy Court for the	NORTHERN DISTRICT OF	F ILLINOIS, EASTERN DIVISION	
Case nu	umber			
(if known)			[Check if this is an
				amended filing
Officia	al Form 106E/F			
		Who Have Unsecure	ed Claims	12/15
			DRITY claims and Part 2 for creditors with NONPRIORITY	
schedule): Credit he Conti	e G: Executory Contracts and Un ors Who Have Claims Secured b	expired Leases (Official Form 1060 y Property. If more space is needed	so list executory contracts on Schedule A/B: Property (O G). Do not include any creditors with partially secured cla d, copy the Part you need, fill it out, number the entries in Part, do not file that Part. On the top of any additional pa	ims that are listed in Schedule the boxes on the left. Attach
Part 1:	List All of Your PRIORITY	Unsecured Claims		
1. Do a	any creditors have priority unsec	ured claims against you?		
I	No. Go to Part 2.			
	Yes.			
Part 2:	List All of Your NONPRIO	RITY Unsecured Claims		
3. Do a	any creditors have nonpriority u	nsecured claims against you?		
	No. You have nothing to report in the	nis part. Submit this form to the court	with your other schedules.	
■ Y	Yes.			
unse	ecured claim, list the creditor separ	ately for each claim. For each claim li	of the creditor who holds each claim. If a creditor has more sted, identify what type of claim it is. Do not list claims already you have more than three nonpriority unsecured claims fill out	y included in Part 1. If more
				Total claim
	Alexian Brothers Medica	I Center Last 4 digits of	account number	\$5,500.00
	Nonpriority Creditor's Name	When was the	debt incurred?	
	PO Box 3495	when was the	uebt incurreu :	
	Toledo, OH 43607-0495			
-	Number Street City State Zlp Cod	•	you file, the claim is: Check all that apply	
	Who incurred the debt? Check of	ine.		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated	I	
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and		RIORITY unsecured claim:	
	Check if this claim is for a			
	debt Is the claim subject to offset?	☐ Obligations a report as priority	arising out of a separation agreement or divorce that you did r	not
	■ No		nsion or profit-sharing plans, and other similar debts	
	□ Yes	<u>_</u>		
	□ 169	Other. Speci	īy	

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Alliance Pathology Consultants	Last 4 digits of account number	\$70.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 5967	when was the dept incurred?	
Carol Stream, IL 60197-5967		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	
american express	Last 4 digits of account number	\$1,900.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 360001	when was the debt incurred?	
Fort Lauderdale, FL 33336-0001		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	
Arlington Ridge Pathology SC	Last 4 digits of account number	\$10.00
Nonpriority Creditor's Name	When was the debt incurred?	
520 E 22nd St	mion has the acti incurred:	
Lombard, IL 60148-6110		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Πyes	Other Specify	

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Debtor 1 Rudnicki, Christine m. & rudnicki, arthur j. Case number (if know) Debtor 2 4.5 Last 4 digits of account number \$5,000.00 **Bank of America** Nonpriority Creditor's Name When was the debt incurred? PO Box 851001 Dallas, TX 75285-1001 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.6 **Bartlett Fire Protection Dist.** Last 4 digits of account number \$1,000.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 88850 Carol Stream, IL 60188-0850 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed \square At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans \square Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.7 **Christy Cardiology** Last 4 digits of account number \$30.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 21043 **Springfield, IL 62708-1043** As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

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Debtor 1 Rudnicki, Christine m. & rudnicki, arthur j, Case number (if know) Debtor 2 4.8 Last 4 digits of account number Citi Bank NA \$13,757.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 3232 Houston, TX 77253-3232 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.9 Comcast Last 4 digits of account number \$400.00 Nonpriority Creditor's Name When was the debt incurred? **C/O Credit Management** PO Box 118288 Carrollton, TX 75011-8288 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed \square At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans \square Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.10 **Core Orthopedics & Sports** Last 4 digits of account number \$30.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 51 Palatine, IL 60078-0051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debto Debto	r 1 r 2 Rudnicki, Christine m. & rudnicki	, arthur j, Case number (f know)	
4.11	Credit One Bank	Last 4 digits of account number	\$1,520.00
	Nonpriority Creditor's Name Co Blatt Hasenmiller, Leibsker & Moore	When was the debt incurred?	
	125 S Wacker Dr Ste 400 Chicago, IL 60606-4440		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.12	Critical Care Physicians	Last 4 digits of account number	\$70.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 5618 Belfast, ME 04915-5600	when was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.13	Discover	Last 4 digits of account number	\$11,440.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 6103		
	Carol Stream, IL 60197-6103 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify	

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Debtor 1 Rudnicki, Christine m. & rudnicki, arthur j, Case number (if know) Debtor 2 4.14 Last 4 digits of account number \$40.00 Elk Grove Radiology Nonpriority Creditor's Name When was the debt incurred? PO Box 4543 Carol Stream, IL 60197-4543 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.15 Germbusters Last 4 digits of account number \$70.00 Nonpriority Creditor's Name When was the debt incurred? 75 Remittance Dr Dept 6524 Chicago, IL 60675-6524 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed \square At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans \square Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.16 **Home Depot** Last 4 digits of account number \$1,100.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 182676 Columbus, OH 43218-2676 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debtor 1 Rudnicki, Christine m. & rudnicki, arthur j, Case number (if know) Debtor 2 4.17 Inpatient Consultants Of Illinois Last 4 digits of account number \$70.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 92934 Los Angeles, CA 90009-2934 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.18 John Boneicz, Esq. Last 4 digits of account number \$7,824.37 Nonpriority Creditor's Name When was the debt incurred? 350 N Orleans St # 300 Chicago, IL 60654-1607 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans \square Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.19 Khols Last 4 digits of account number \$3,590.00 Nonpriority Creditor's Name **Receivables Performance** When was the debt incurred? Management **PO Box 1548** Lynnwood, WA 98046-1548 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Debto	Rudnicki, Christine m. & rudnicki	, arthur j, Case number (f know)	
4.20	midland funding Nonpriority Creditor's Name	Last 4 digits of account number	\$2,637.00
	c/o Blitt and Gaines, P.C. 661 Glenn Ave Wheeling, IL 60090-6017	When was the debt incurred?	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.21	Midwest Emergency Associates Nonpriority Creditor's Name	Last 4 digits of account number	\$5,590.00
		When was the debt incurred?	
	PO Box 740023		
	Cincinnati, OH 45274-0023 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date you me, the stain is. Onesk an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.22	Midwest Imaging Professionals	Last 4 digits of account number	\$60.00
	Nonpriority Creditor's Name	When we the debt incorred?	
	Merchant's Credit Guide 223 W Jackson Blvd # 700 Chicago, IL 60606-6914	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify	

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Rudnicki, Christine m. & rudnicki	, arthur j, Case number (if know)	
Northwest Community Hospital Nonpriority Creditor's Name	Last 4 digits of account number	\$200.00
Tremphony Greater & Trame	When was the debt incurred?	
PO Box 48458		
Oak Park, MI 48237-6058		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one. Debtor 1 only	_	
	Contingent	
Debtor 2 only	Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
	_	
Yes	Other. Specify	
Northwest Community Medical		
Group	Last 4 digits of account number	\$150.00
Nonpriority Creditor's Name		
05000 N / N PI	When was the debt incurred?	
25228 Network PI Chicago, IL 60673-1252		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Northwest Community Physician	Last 4 digits of account number	\$80.00
Nonpriority Creditor's Name		Ψ00.00
	When was the debt incurred?	
520 E 22nd St		
Lombard, IL 60148-6110 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	and date you may and diam is. Oncor an mat apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
_	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes		
□ 162	Other. Specify	

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Debto	Rudnicki, Christine m. & rudnicki,	Case number (# know)	
1.26	Northwest Health Care Ass. Nonpriority Creditor's Name	Last 4 digits of account number	\$300.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	2500 W Higgins Rd Ste 505 Hoffman Estates, IL 60169-2045 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
1.27	Northwest Radiology Associates Nonpriority Creditor's Name	Last 4 digits of account number	\$200.00
	Nonphorty Creditors Name	When was the debt incurred?	
	520 E 22nd St Lombard, IL 60148-6110		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
1.28	NWHC Buisness Office	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name	When we the debt incorred?	
	2500 W Higgins Rd Ste 205 Hoffman Estates, IL 60169-7273	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Debto Debto	or 1 or 2 Rudnicki, Christine m. & rudnicki	, arthur j, Case number (f know)	
4.29	Pellettieri Group	Last 4 digits of account number	\$140.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	1717 Park St Ste 105 Naperville, IL 60563-8576		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	Debtor 2 only	☐ Contingent ☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.30	Professional Cardic Services	Last 4 digits of account number	\$40.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	520 E 22nd St Lombard, IL 60148-6110	When was the dest incurred:	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
	Radiological Consultants of		
4.31	Woodstock	Last 4 digits of account number	\$513.00
	Nonpriority Creditor's Name Creditors Discount 415 E Main St	When was the debt incurred?	
	Streator, IL 61364-2927 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other Specify	

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Debtor 1 Debtor 2 Rudnicki, Christine m. & rudnicki, arthur j, Case number (if know) Schaumburg Medicine & \$100.00 4.32 **Endocrinology** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1439 W Schaumburg Rd Schaumburg, IL 60194-4051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.33 sears Last 4 digits of account number \$0.00 Nonpriority Creditor's Name When was the debt incurred? Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.34 Sears Last 4 digits of account number \$2,770.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 183081 Columbus, OH 43218-3081 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts Case 17-03179 Doc 1 Filed 02/03/17 Entered 02/03/17 11:28:13 Desc Main Document Page 32 of 67

		_
Shell Nonpriority Creditor's Name	Last 4 digits of account number	\$2,460.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 183018		
Columbus, OH 43218-3018		
lumber Street City State Zlp Code Vho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
Debtor 2 only	Contingent	
_	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
St Alexius Medical Center	Last 4 digits of account number	\$5,500.0
Nonpriority Creditor's Name	When was the debt incurred?	
22589 Network PI	When was the dept incurred:	
Chicago, IL 60673-1225		
lumber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
\square Check if this claim is for a community	☐ Student loans	
lebt	Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
■ No □ Yes	Debts to pension or profit-sharing plans, and other similar debts	
ı res	Other. Specify	
State Collection Service	Last 4 digits of account number	\$70.00
Nonpriority Creditor's Name	When was the debt incurred?	
2509 S Stoughton Rd Madison, WI 53716-3314		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Ves	Other Specific	

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Document Page 33 of 67 Debtor 1 Rudnicki, Christine m. & rudnicki, arthur j, Case number (if know) Debtor 2 Suburban Ednocrinology And \$350.00 4.38 **Diabetes** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2101 S Arlington Heights Rd Ste Arlington Heights, IL 60005-4197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: $\hfill \square$ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.39 **Superior Air Ground Amb Service** Last 4 digits of account number \$60.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 1407 Elmhurst, IL 60126-8407 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.40 **Target** Last 4 digits of account number \$11,310.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 660170 Dallas, TX 75266-0170 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

Other. Specify

☐ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debto	Rudnicki, Christine m. & rudnicki	, arthur j, Case number (f know)	
4.41	Vijay Rajaram Md	Last 4 digits of account number	\$30.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	777 Oakmont Ln Ste 1600 Westmont, IL 60559-5577		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.42	Village Of Hoffman Estates Nonpriority Creditor's Name	Last 4 digits of account number	\$450.00
	,	When was the debt incurred?	
	PO Box 457		
	Wheeling, IL 60090-0457 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
	Debtor 1 only	Пол	
	Debtor 2 only	☐ Contingent	
	_	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes		
	Li Tes	Other. Specify	
4.43	Walmart Discover/Gecrb Nonpriority Creditor's Name	Last 4 digits of account number	\$2,100.00
	. ,	When was the debt incurred?	
	PO Box 960024		
	Orlando, FL 32896-0024 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	☐ Unliquidated	
	•	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
	_ 100	— Other, Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1
Debtor 2
Rudnicki, Christine m. & rudnicki, arthur j,

Case number (if know)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total claims	6f.	Student loans	6f.	\$ 0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 88,631.37
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 88,631.37

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Fill in this infor	mation to identify your	case:		
Debtor 1	Christine m. Rud	nicki		
	First Name	Middle Name	Last Name	—)
Debtor 2	arthur j, rudnicki			
(Spouse if, filing)	First Name	Middle Name	Last Name	<u> </u>
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	
Case number (if known)				☐ Check if this is a
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number,	whom you have the Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Oldic	Zii Oouc	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.4	City		Otate	ZII Code	
2.7	Name				_
	Number	Street			_
					<u></u>
0.5	City		State	ZIP Code	
2.5	Nama				_
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>

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Fill in this	information to identify your	case:	eni Paue 37 ui	07	
Debtor 1	Christine m. Rud				
Debtor 2	First Name arthur j, rudnicki	Middle Name	Last Name		
(Spouse if, fili		Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS, EASTERN	DIVISION	
Case num (if known)	ber				Check if this is an amended filing
	l Form 106H Iule H: Your Cod	ebtors			12/15
are filing to and numbe	ogether, both are equally resp	onsible for supplying c the left. Attach the Addi	orrect information. If more	e space is needed, co	as possible. If two married people py the Additional Page, fill it out, itional Pages, write your name and
1. Do	you have any codebtors? (If y	ou are filing a joint case, o	do not list either spouse as a	a codebtor.	
■ No	3				
	hin the last 8 years, have you rnia, Idaho, Louisiana, Nevada,				states and territories include Arizona,
	Go to line 3. Big John Spouse, former spouse, former spouse.	se, or legal equivalent live	with you at the time?		
line 2	again as a codebtor only if th , Schedule E/F (Official Form	at person is a guaranto	r or cosigner. Make sure y	ou have listed the cre	rith you. List the person shown in editor on Schedule D (Official Form E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The crec Check all schedules	ditor to whom you owe the debt s that apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	ne
	Number Street City	State	ZIP Code		
3.2	Name			☐ Schedule D, line☐ Schedule E/F, lin	
	Number			☐ Schedule G, line	
	Number Street	State	ZIP Code		

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Fill	in this information to identif	y your cas	se:								
Deb	otor 1 Chris	stine m.	Rudnicki								
	otor 2 arthu	ır j, rudn	icki			_					
Uni	ted States Bankruptcy Cou	rt for the:	NORTHERN DISTRIC	T OF ILLINOIS, EA	STERN	_					
	se number 						Check if this is: An amende A suppleme income as o	nt sho	wing pos		chapter 13
	fficial Form 106	_					MM / DD/ Y	YYY	-		
Be a	chedule I: Your s complete and accurate plying correct information	as possik n. If you a	ole. If two married peop re married and not filing	g jointly, and your	spouse is	livir	ng with you, includ	le info	rmation	about yo	our
atta	use. If you are separated a ch a separate sheet to this time. t 1: Describe Emplo	s form. O									
1.	Fill in your employment information.	•		Debtor 1			Debtor 2	or no	n-filing	spouse	
	If you have more than one attach a separate page with	:h	Employment status	■ Employed □ Not employed			■ Emplo	•	ad		
	information about addition employers.	nal	Occupation				Not e	прюуе			
	Include part-time, season self-employed work.	al, or	Employer's name	substitute tead	her						
	Occupation may include shomemaker, if it applies.	student or	Employer's address								
			How long employed th	ere? <u>1 year</u>	s						
Par	t 2: Give Details Ab	out Mont	hly Income								
	mate monthly income as o	of the dat	e you file this form. If yo	ou have nothing to re	port for an	y line	e, write \$0 in the spa	ice. Ind	clude you	ur non-filir	ng spouse
f you spac	u or your non-filing spouse he, attach a separate sheet t	nave more o this form	than one employer, comb	ine the information fo	or all emplo	oyers	for that person on	the line	es below	. If you ne	ed more
							For Debtor 1		Debtor		
2.	List monthly gross wag deductions). If not paid m				2.	\$	1,600.00	\$_		0.00	
3.	Estimate and list month	ly overtin	пе рау.		3.	+\$	0.00	+\$		0.00	
4.	Calculate gross Income	. Add line	2 + line 3.		4.	\$	1,600.00	\$		0.00	

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Deb	otor 2	Rudnicki, Christine m. & rudnicki, arthur j,	_	С	ase number (if k	nown)			
					For Debtor 1		non-fil	ebtor 2 or ling spouse	
	Cop	by line 4 here	4.		\$1,600	0.00	\$	0.00	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a			5.00	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b		. —	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c		. —	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d			0.00	\$	0.00	
	5e.	Insurance	5e			0.00	\$	0.00	
	5f.	Domestic support obligations Union dues	5f.		. —	0.00	\$	0.00	
	5g. 5h.	Other deductions. Specify:	5g 5h	,	·	0.00	· <u> </u>	0.00	
^		· · ·			·				
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.			5.00	\$	0.00	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	1,43	5.00	\$	0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b		·	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.				0.00	\$	0.00	
	8d.	Unemployment compensation	8d	l.	\$	0.00	\$	0.00	
	8e.	Social Security	8e) .	\$ 3,000	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		. —	0.00	\$	0.00	
	8g.	Pension or retirement income	8g			0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h	1.+	\$	0.00	+ \$	0.00	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,000	0.00	\$	0.00]
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	4,435.00	+ \$		0.00 = \$	4,435.00
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ť-	4,400.00			<u></u>	1,100.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avecify:	lepende		. ,	•		e J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certain						12. \$	4,435.00
13.	Do :	you expect an increase or decrease within the year after you file this form No. Yes. Explain: The \$3000.00 disability payment will drop to \$2		00 -	agu marath -	no		monthly	income
		Yes. Explain: The \$3000.00 disability payment will drop to \$2	.,ວບບ.(υu	Jer montn O	nce s	on reac	nes age of 1	0.

Official Form 106I Schedule I: Your Income page 2

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F <u>ill in</u>	this informa	ation to identify you	ır case:]		
Debto				:		Ch	eck if this is:	
Debio	,, ,	Christine m.	Ruanick	(1			An amended filing	
Debto	or 2	arthur j, rudn	icki				A supplement show	wing postpetition chapter 13
(Spou	ise, if filing)	<u>-</u>					expenses as of the	e following date:
United	d States Bankı	ruptcy Court for the:		IERN DISTRICT OF ILLIN RN DIVISION	OIS,		MM / DD / YYYY	
Case (If kno	number							
Off	icial Fo	orm 106J				I		
Sc	hedule	J: Your E	xpen	ses				12/1
Be as	s complete a mation. If m lown). Answ	and accurate as p	oossible. ded, attac n.	If two married people are				supplying correct our name and case numbe
1.	Is this a joir	nt case?						
	☐ No. Go to	o line 2.						
	Yes. Doe	es Debtor 2 live in	a separa	te household?				
	■ N □ Y		: file Offici	al Form 106J-2, <i>Expenses</i> i	for Separate Househ	noldof Debt	or 2.	
2.	Do vou hav	e dependents?	□ No					
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not ototo	tha						□ No
	Do not state dependents						17	■ Yes
								□ No
							15	■ Yes
								_ □ No
							<u> </u>	Yes
								□ No □ Yes
	expenses of	penses include f people other tha	an ┌┐	No Yes			_	· Pes
	yourself and	d your dependen	isr —	- -				
expe	nate your ex		ur bankru	y Expenses ptcy filing date unless yo is filed. If this is a supple				
value		sistance and hav		overnment assistance if yed it on Schedule I: Your I			Your exp	penses
•		,						
		or home ownersh nd any rent for the o		ses for your residence. Industrial	clude first mortgage	4.	\$	2,200.00
	If not includ	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner's,	or renter's	insurance		4b.		0.00
	4c. Home	maintenance, rep	pair, and u	pkeep expenses		4c.	·	100.00
		eowner's association				4d.	·	0.00
5.	Additional r	mortgage paymer	nts for yo	ur residence, such as hom	ne equity loans	5.	\$	0.00

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Debtor 1 Debtor 2		Case number (if known)	
6. Util	lities:		
6a.		6a. \$	300.00
6b.	Water, sewer, garbage collection	6b. \$	100.00
6c.	Telephone, cell phone, Internet, satellite, and cable service	es 6c. \$	200.00
6d.	Other. Specify:	6d. \$	0.00
. Foc	od and housekeeping supplies	7. \$	700.00
Chi	ildcare and children's education costs	8. \$	0.00
. Clo	othing, laundry, and dry cleaning	9. \$	0.00
o. Per	rsonal care products and services	10. \$	0.00
1. Me	dical and dental expenses	11. \$	0.00
	insportation. Include gas, maintenance, bus or train fare.	· 	
	not include car payments.	12. \$	0.00
3. Ent	tertainment, clubs, recreation, newspapers, magazines, an	d books 13. \$	0.00
. Cha	aritable contributions and religious donations	14. \$	0.00
5. Ins i	urance.		
	not include insurance deducted from your pay or included in I		
	a. Life insurance	15a. \$	0.00
	b. Health insurance	15b. \$	830.00
15c	c. Vehicle insurance	15c. \$	0.00
	d. Other insurance. Specify:	15d. \$	0.00
Spe	kes. Do not include taxes deducted from your pay or included in ecify:	lines 4 or 20 16. \$	0.00
	tallment or lease payments:	17a. \$	0.00
	a. Car payments for Vehicle 1	•	0.00
	c. Car payments for Vehicle 2	17b. \$	0.00
	c. Other. Specify:	17c. \$	0.00
	d. Other. Specify:	17d. \$	0.00
	ur payments of alimony, maintenance, and support that yo ducted from your pay on line 5, Schedule I, Your Income (0.00
	ner payments you make to support others who do not live		0.00
	ecify:	19.	0.00
	ner real property expenses not included in lines 4 or 5 of the		
	a. Mortgages on other property	20a. \$	0.00
20b	o. Real estate taxes	20b. \$	0.00
20c	c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	e. Homeowner's association or condominium dues	20e. \$	0.00
	ner: Specify:	21. +\$	0.00
	Iculate your monthly expenses		
	a. Add lines 4 through 21.		,430.00
22b	 Copy line 22 (monthly expenses for Debtor 2), if any, from 0 	Official Form 106J-2 \$	
22c	c. Add line 22a and 22b. The result is your monthly expenses.	\$4	,430.00
3. Cal	culate your monthly net income.		
	a. Copy line 12 (your combined monthly income) from Schedu	le I. 23a. \$	4,435.00
23b	o. Copy your monthly expenses from line 22c above.	23b\$	4,430.00
23c	c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	5.00
For	you expect an increase or decrease in your expenses with example, do you expect to finish paying for your car loan within the ye diffication to the terms of your mortgage?		e because of a
П	Yes. Explain here:		

page 2

Official Form 106J

Fill in this infor	rmation to identify your	case:					
Debtor 1	Christine m. Rud	dnicki					
	First Name	Middle Name	I	ast Name)	
Debtor 2	arthur j, rudnicki			ant Name			
(Spouse if, filing)	FIIST Name	Middle Name	L	ast Name			
United States B	ankruptcy Court for the:	NORTHERN DISTRI	ICT OF ILLIN	OIS, EASTERN	DIVISION		
Case number							
(if known)						☐ Che	ck if this is an
						ame	nded filing
O#: a: a E a #	40CD						
Official For							
Declara	tion About a	an Individu:	al Deb	tor's Sc	chedules		12/15
If two married p	eople are filing together	r, both are equally resp	onsible for s	supplying corre	ect information.		
You must file th	is form whenever you fil	ile bankruptcy schedul	es or amend	ed schedules. N	Making a false sta	atement, concealing	g property, or
	y or property by fraud ir		nkruptcy cas	se can result in	fines up to \$250,	,000, or imprisonme	ent for up to 20
years, or both.	18 U.S.C. §§ 152, 1341, 1	519, and 3571.					
Sig	gn Below						
Did you pa	ay or agree to pay some	one who is NOT an att	orney to help	you fill out ba	nkruptcy forms?	•	
— Na							
■ No							
☐ Yes.	Name of person					Bankruptcy Petition I	
					Deciara	ation, and Signature (Official Form 119)
	alty of perjury, I declare true and correct.	that I have read the su	ımmary and	schedules filed	with this declara	tion and	
X /s/ Ch							
	ristine m. Rudnicki)	(/s/ arthur i	. rudnicki		
Chris	ristine m. Rudnicki tine m. Rudnicki			(<u>/s/ arthur j,</u> arthur j, ru	•		
					idnicki		

Date February 3, 2017

Date February 3, 2017

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Fill	in this inform	ation to identify your					
Deb	otor 1	Christine m. Rue	Middle Name	Last Name			
Deb	otor 2	arthur j, rudnick		<u> Laot Hamo</u>			
(Spo	use if, filing)	First Name	Middle Name	Last Name			
Unit	ted States Bar	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTI	ERN DIVI	SION	
Cas (if kn	se number					-	theck if this is an mended filing
Sta		of Financial	Affairs for Indivi			ankruptcy	4/16
		ore space is needed, a er every question.	attach a separate sheet to t	his form. On the top	of any a	additional pages, write your i	name and case number
		etails About Your Ma	rital Status and Where You	Lived Before			
-	■ Married □ Not mar						
2.	During the la	st 3 vears. have vou	lived anywhere other than v	where vou live now	?		
	■ No □ Yes. List	all of the places you liv	ed in the last 3 years. Do not	include where you liv	e now.		
	Debtor 1 Pri	or Address:	Dates Debtor 1 there	lived Debtor 2	Prior Ad	dress:	Dates Debtor 2 lived there
						y property state or territory? o, Texas, Washington and Wis	
	■ No □ Yes. Mal	ke sure you fill out <i>Sch</i> e	edule H: Your Codebtors (Off	icial Form 106H).			
Par	Explain	n the Sources of Your	Income				
	Fill in the tota	I amount of income you	ployment or from operating a received from all jobs and a ave income that you receive to	all businesses, includ	ling part-t		ar years?
	□ No ■ Yes. Fill	in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	Gross income (before deduction exclusions)	is and	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	last calendar nuary 1 to De	year: cember 31, 2016)	☐ Wages, commissions, bonuses, tips		\$0.00	■ Wages, commissions, bonuses, tips	\$3,000.00
			☐ Operating a business			☐ Operating a business	

Debt		Case 17-03179	Doc 1 Filed 02/03 Documer		3/17 11:28:13 Des	sc Main
Debt		ıdnicki, Christine m.	& rudnicki, arthur j,	Case	e number (if known)	
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		dar year before that: December 31, 2015)	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$0.00
			Operating a business		☐ Operating a business	
	he calend uary 1 to	dar year: December 31, 2014)	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	
_	□ No	source and the gross inco	me from each source separatel	ly. Do not include income that y		
			Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
		dar year: December 31, 2016)	disability for Husband	exclusions) \$30,000.00		
		dar year before that: December 31, 2015)	disability for Husband	\$36,000.00		
	he calend uary 1 to	dar year: December 31, 2014)	Disability for Husband	\$36,000.00		
Part	3: list	Certain Payments You	Made Before You Filed for E	Bankruntev		
		Debtor 1's or Debtor 2'	's debts primarily consumer Debtor 2 has primarily consu personal, family, or household	debts? mer debts. Consumer debts a	are defined in 11 U.S.C. § 101(8	3) as "incurred by an
ı	■ Yes.	No. Go to line to Yes List below to creditor. Do payments to the Subject to adjustment to the Subject 1 or Debtor 2 or Debtor 1 or Debtor 2 or Debtor	ore you filed for bankruptcy, did 7. each creditor to whom you paid o not include payments for dor on an attorney for this bankruptch ton 4/01/19 and every 3 years are both have primarily consulting you filed for bankruptcy, did	a total of \$6,425* or more in o mestic support obligations, surely case. after that for cases filed on or a mer debts.	ne or more payments and the to ch as child support and alimon after the date of adjustment.	

■ No. Go to line 7.

□ _{Yes} List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment Amount you Was this payment for ... **Total amount** still owe paid

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	btor 1 btor 2 Rudnicki, Christine m. & rudnic	ki, arthur j,	Cas	se number (if known)		
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general partr which you are an officer, director, person in cont business you operate as a sole proprietor. 11 U.	ners; relatives of any genera trol, or owner of 20% or mor	I partners; partnershi e of their voting secu	ps of which you are rities; and any mar	e a general partner; c naging agent, includir	g one for a
	■ No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this p	payment
8.	Within 1 year before you filed for bankruptcinsider? Include payments on debts guaranteed or cosig		nents or transfer ar	ny property on ac	count of a debt tha	t benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this pulnclude creditor's	
Pal	rt 4: Identify Legal Actions, Repossessions	s and Foreclosures				
9.	Within 1 year before you filed for bankruptc List all such matters, including personal injury cand contract disputes. □ No ■ Yes. Fill in the details.					ly modifications,
	Case title Case number	Nature of the case	Court or agency		Status of the cas	е
	Target National Bank v. Rudnicki	collection	Clerk of circuit cook county il		☐ Pending ☐ On appeal ☐ Concluded	
	CACH LLC v. Christine Rudnicki 13 M1 106134	collection	Third Distric co 2121 Euclid Av Rolling Meado 60008-1500	/e	☐ Pending ☐ On appeal ☐ Concluded	
	Midland Funding v. Christine	collection	Third Distric co	•	■ Pending	
	Rudnicki 15 M3 5440		2121 Euclid Av Rolling Meado 60008-1500		☐ On appeal ☐ Concluded	
	Midland Funding v. Arthur		midland fundir		■ Pending	
	rudnicki 16M3 7569		661 Glenn Ave Wheeling, IL 6		On appeal	
	10.00		wincemig, it of	0000 0017	☐ Concluded	
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below		rty repossessed, fo	reclosed, garnish	ned, attached, seize	d, or levied?
	■ No. Go to line 11. □ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your

Explain what happened

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Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Description and value of any property

Date of your loss

Value of property lost

Part 7: List Certain Payments or Transfers

Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

transferred

- ☐ No
- Yes. Fill in the details.

Person Who Was Paid **Address Email or website address** Person Who Made the Payment, if Not You

Date payment or transfer was made

Amount of payment

Law Offices of James M. Kelly 119 N Northwest Hwy Palatine, IL 60067-5324

0.00

\$0.00

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Deb	otor 2 Rudnicki, Christine m. & rudnicki,	artnur j,		Case number	(if known)	
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you list	or to make payments			transfer any proper	y to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and vertransferred	alue of any prop	erty	Date payment or transfer was made	Amount o paymen
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers made gifts and transfers that you have already listed on t No Yes. Fill in the details.	iness or financial affai as security (such as the	rs?			
	Person Who Received Transfer Address Person's relationship to you	Description and vo			any property or received or debts change	Date transfer was made
19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-protect No ☐ Yes. Fill in the details.		property to a se	elf-settled trus	st or similar device o	f which you are a
	Name of trust	Description and v	alue of the prope	erty transferre	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit I	Boxes, and Stora	age Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa No Yes. Fill in the details.	other financial account	s; certificates of		-	
		Last 4 digits of account number	Type of account instrument	clo mo	te account was osed, sold, oved, or onsferred	Last balance before closing or transfe
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for I	oankruptcy, any	safe deposit	box or other deposite	ory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had according Address (Number, Stand ZIP Code)		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your l	nome within 1 ye	ear before you	ı filed for bankruptcy	?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St		Describe the	contents	Do you still have it?

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for

Debtor 1

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☐ An owner of at least 5% of the voting or equity securities of a corporation

Case 17-03179 Doc 1 Filed 02/03/17 Entered 02/03/17 11:28:13 Desc Main Page 49 of 67 Document Debtor 1 Rudnicki, Christine m. & rudnicki, arthur j, Case number (if known) Debtor 2 No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Christine m. Rudnicki /s/ arthur j, rudnicki Christine m. Rudnicki arthur j, rudnicki Signature of Debtor 1 Signature of Debtor 2 Date February 3, 2017 Date February 3, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

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Debtor 2 (Spouse if, filling) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number (if known) Check if this	btor 1	Christine m. Ru	ıdnicki			
(Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number		First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number	otor 2	arthur j, rudnici	ki			
Case number	ouse if, filing)	First Name	Middle Name	Last Name	i	
	- · · · · ·					Check if this is ar
amended fi						amended filing

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

nformation below.		
dentify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the propert as exempt on Schedule C
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a <i>Reaffirmation</i> Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

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Debtor 1 Debtor 2 Rudnicki, Christine m. & rudnicki, arthur j.	Case number (if known)	
name:	☐ Retain the property and redeem it.☐ Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
Description of	Agreement.	
property	☐ Retain the property and [explain]:	
securing debt:		_
Part 2: List Your Unexpired Personal Property Leases		
For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Unexpire may assume an unexpired personal property lease if the trus	ed leases are leases that are still in effect; the leas	
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased		110
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
•		
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Part 3: Sign Below		
Under penalty of perjury, I declare that I have indicated my in property that is subject to an unexpired lease.	ntention about any property of my estate that secu	ures a debt and any personal
X /s/ Christine m. Rudnicki	X /s/ arthur j, rudnicki	
Christine m. Rudnicki	arthur j, rudnicki	
Signature of Debtor 1	Signature of Debtor 2	
Date February 3, 2017	Date February 3, 2017	

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

In re	Rudnicki, Christine m. & rudnicki, arthur j,		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR D	EBTOR	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation or	g of the petition in bankruptcy	y, or agreed to be paid	d to me, for services re	
	For legal services, I have agreed to accept		\$	2,000.00	
	Prior to the filing of this statement I have received		\$	2,000.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe firm.	ensation with any other person	n unless they are men	nbers and associates o	f my law
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name				law firm. A
5.	In return for the above-disclosed fee, I have agreed to rer	nder legal service for all aspec	cts of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] 	ment of affairs and plan whic	h may be required;	•	cruptcy;
6.	By agreement with the debtor(s), the above-disclosed fee	does not include the following	ng service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any pankruptcy proceeding.	agreement or arrangement for	or payment to me for	representation of the	debtor(s) in
F	February 3, 2017	/s/ James M. Kell	у		
I	Date	James M. Kelly Signature of Attorne	211		
		Law Offices of Ja			
		119 N Northwest			
		Palatine, IL 6006			
		jkellylaw94@yah	oo.com		
		Name of law firm			

Case 17-03179 Doc 1 Filed 02/03/17 Entered 02/03/17 11:28:13 Desc Main Document Page 53 of 67 United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:		Case No
Rudnicki, Christine m. & rudnicki, arthur j,		Chapter 7
	Debtor(s)	
	VERIFICATION OF CREDITO	OR MATRIX
		Number of Creditors46
The above-named Debtor(s) he	ereby verifies that the list of creditors is tr	ue and correct to the best of my (our) knowledge.
Date: February 3, 2017	/s/ Christine m. Rudnicki	
	Debtor	
	/s/ arthur j, rudnicki	
	Joint Debtor	

Alexian Brothers Medical Center PO Box 3495 Toledo, OH 43607-0495

Alliance Pathology Consultants PO Box 5967 Carol Stream, IL 60197-5967

american express PO Box 360001 Fort Lauderdale, FL 33336-0001

Arlington Ridge Pathology SC 520 E 22nd St Lombard, IL 60148-6110

Bank of America PO Box 851001 Dallas, TX 75285-1001

Bartlett Fire Protection Dist. PO Box 88850 Carol Stream, IL 60188-0850

Cach LLC C/O John Bonewicz 350 N Orleans St Ste 300 Chicago, IL 60654-1607 charter One Asset Recovery Rjw 350 PO Box 42021 Providence, RI 02940-2021

Christy Cardiology PO Box 21043 Springfield, IL 62708-1043

Citi Bank NA PO Box 3232 Houston, TX 77253-3232

citibank PO Box 769013 San Antonio, TX 78245-9013

Comcast C/O Credit Management PO Box 118288 Carrollton, TX 75011-8288

Core Orthopedics & Sports PO Box 51 Palatine, IL 60078-0051

Credit One Bank Co Blatt Hasenmiller, Leibsker & Moore 125 S Wacker Dr Ste 400 Chicago, IL 60606-4440 Critical Care Physicians PO Box 5618 Belfast, ME 04915-5600

Discover PO Box 6103 Carol Stream, IL 60197-6103

Elk Grove Radiology PO Box 4543 Carol Stream, IL 60197-4543

Germbusters 75 Remittance Dr Dept 6524 Chicago, IL 60675-6524

Home Depot PO Box 182676 Columbus, OH 43218-2676

Inpatient Consultants Of Illinois PO Box 92934 Los Angeles, CA 90009-2934

John Boneicz, Esq. 350 N Orleans St # 300 Chicago, IL 60654-1607

Khols Receivables Performance Management PO Box 1548 Lynnwood, WA 98046-1548

midland funding c/o Blitt and Gaines, P.C. 661 Glenn Ave Wheeling, IL 60090-6017

Midwest Emergency Associates PO Box 740023 Cincinnati, OH 45274-0023

Midwest Imaging Professionals Merchant's Credit Guide 223 W Jackson Blvd # 700 Chicago, IL 60606-6914

Northwest Community Hospital PO Box 48458 Oak Park, MI 48237-6058

Northwest Community Medical Group 25228 Network Pl Chicago, IL 60673-1252

Northwest Community Physician Ass 520 E 22nd St Lombard, IL 60148-6110

Northwest Health Care Ass. 2500 W Higgins Rd Ste 505 Hoffman Estates, IL 60169-2045

Northwest Radiology Associates 520 E 22nd St Lombard, IL 60148-6110

NWHC Buisness Office 2500 W Higgins Rd Ste 205 Hoffman Estates, IL 60169-7273

Pellettieri Group 1717 Park St Ste 105 Naperville, IL 60563-8576

Professional Cardic Services 520 E 22nd St Lombard, IL 60148-6110

Radiological Consultants of Woodstock Creditors Discount 415 E Main St Streator, IL 61364-2927

Schaumburg Medicine & Endocrinology 1439 W Schaumburg Rd Schaumburg, IL 60194-4051

Sears
PO Box 183081
Columbus, OH 43218-3081

Shell PO Box 183018 Columbus, OH 43218-3018

St Alexius Medical Center 22589 Network Pl Chicago, IL 60673-1225

State Collection Service 2509 S Stoughton Rd Madison, WI 53716-3314

Suburban Ednocrinology And Diabetes 2101 S Arlington Heights Rd Ste 111 Arlington Heights, IL 60005-4197

Superior Air Ground Amb Service PO Box 1407 Elmhurst, IL 60126-8407

Target
PO Box 660170
Dallas, TX 75266-0170

Vijay Rajaram Md 777 Oakmont Ln Ste 1600 Westmont, IL 60559-5577

Village Of Hoffman Estates PO Box 457 Wheeling, IL 60090-0457

Walmart Discover/Gecrb PO Box 960024 Orlando, FL 32896-0024

wells fargo PO Box 5296 Carol Stream, IL 60197-5296

Fill in this information to identify your case:	Check one box only as directed in this form and in Form 122A-1Supp:
Debtor 1 Christine m. Rudnicki	
Debtor 2 arthur j, rudnicki (Spouse, if filing)	■ 1. There is no presumption of abuse
United States Bankruptcy Court for the: Northern District of Illinois, Eastern Division	☐ 2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means Test Calculation</i> (Official Form 122A-2).
Case number(if known)	3. The Means Test does not apply now because of qualified military service but it could apply later.
	☐ Check if this is an amended filing
Official Form 122A - 1	
Chapter 7 Statement of Your Current Monthly	Income 12/15
Be as complete and accurate as possible. If two married people are filing together, both are a separate sheet to this form. Include the line number to which the additional information a number (if known). If you believe that you are exempted from a presumption of abuse becamilitary service, complete and file Statement of Exemption from Presumption of Abuse Unit Part 1: Calculate Your Current Monthly Income	pplies. On the top of any additional pages, write your name and case use you do not have primarily consumer debts or because of qualifying
What is your marital and filing status? Check one only.	

□ Not married. Fill out Column A, lines 2-11. ■ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. ☐ Married and your spouse is NOT filing with you. You and your spouse are: ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. ☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living

apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. §

101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months, and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses

				umn A Itor 1	Column Debtor non-fili	
Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and com	missior	ns (before all \$	1,600.00	\$	0.00
 Alimony and maintenance payments. Do not include Column B is filled in. 	payment	s from a	spouse if \$	0.00	\$	0.00
 All amounts from any source which are regularly partial of you or your dependents, including child support from an unmarried partner, members of your household, roommates. Include regular contributions from a spous Do not include payments you listed on line 3. Net income from operating a business, profession, 	Include r your depose only if C	egular endents	contributions , parents, and	0.00	\$	0.00
That moome from operating a backness, pressession,	0	Deb	otor 1			
Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or fail	\$ -\$ rm \$	0.00 0.00 0.00	Copy here -> \$	0.00	\$	0.00
Net income from rental and other real property				_	'	
		Deb	otor 1			
Gross receipts (before all deductions)	\$	0.00				
Ordinary and necessary operating expenses	-\$	0.00				
Net monthly income from rental or other real property	\$	0.00	Copy here -> \$	0.00	\$	0.00
rect mentally meeting from tental of earlier real property					\$	

12/15

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Debtor 1 Debtor 2 Rudnicki, Christine m. & rudnicki, arthur j,

Case number (if known)

					Column A Debtor 1			nn B or 2 or iling spouse	
8.	Unemployment compensation				\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount re Social Security Act. Instead, list it here:		under th	he					
	For you \$		0.00						
	For your spouse \$		0.00						
	Pension or retirement income. Do not include any amounder the Social Security Act.				\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Specinot include any benefits received under the Social Securit a victim of a war crime, a crime against humanity, or inter If necessary, list other sources on a separate page and p	by Act or payments remational or domestic	ceived a	as n.	•		•		
	social security				\$3 <u>,0</u>	00.00	\$	0.00	
					\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.			+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the tot		\$	4	,600.00	+	0.	00 = \$	4,600.00
Part	2: Determine Whether the Means Test Applies to	You						incom	
12.	Calculate your current monthly income for the year.	Follow these steps:							
	12a. Copy your total current monthly income from line 1	·			Copy	line 11 l	nere=>	\$	4,600.00
		<u></u>							4,000.00
	Multiply by 12 (the number of months in a year)							x ·	12
	12b. The result is your annual income for this part of the	form						12b. \$	55,200.00
13.	Calculate the median family income that applies to y	ou. Follow these ste	ps:						
	Fill in the state in which you live.	IL]						
	Fill in the number of people in your household.	4]						
	Fill in the median family income for your state and size of				the concrete		iono for i	. σ. ψ	36,921.00
	To find a list of applicable median income amounts, go form. This list may also be available at the bankruptcy of		specified	u III	the separate	e instruct	IONS ION	ınıs	
14.	How do the lines compare?								
	Line 12b is less than or equal to line 13. Of Go to Part 3.	n the top of page 1,	check bo	ox 17	,here is no p	resumpti	on of abu	use.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	f page 1, check box	2Ţhe pre	esur	nption of abu	ise is det	termined	by Form 122A	-2.
Part	3: Sign Below								
	By signing here, I declare under penalty of perjury the	at the information on	this stat	tem	ent and in an	y attachn	nents is	true and correc	t.
	X /s/ Christine m. Rudnicki	X	/s/ art	thu	r j, rudnicl	ki			
	Christine m. Rudnicki	<u> </u>	arthu	r j,	rudnicki				
	Signature of Debtor 1	Data	Ū		of Debtor 2 y 3, 2017				
	Date February 3, 2017 MM / DD / YYYY	Date	MM / D	DD .	/ 3, 2017 / YYYY			_	
	If you checked line 14a, do NOT fill out or file Form	122A-2.							
	If you checked line 14b, fill out Form 122A-2 and fi	le it with this form.							

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	-
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. $_{B201B\ (Form\ 2GBS}e_{2/9}$ 7-03179

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Desc Main

Document Page 67 of 67 United States Bankruptcy Court

Northern District of Illinois, Eastern Division

IN RE:	Case No				
Rudnicki, Christine m. & rudnicki, arthur j,	Chapter 7				
Debtor(s)	•				
CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)					

	F NOTICE TO CONSUMER DEBTOR(S) b) OF THE BANKRUPTCY CODE	
Certificate of [Non-	Attorney] Bankruptcy Petition Preparer	
I, the [non-attorney] bankruptcy petition preparer signin notice, as required by § 342(b) of the Bankruptcy Code.		the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Paddress:	petition preparer is the Social Security	
X	ncipal, responsible person, or	.s.c. § 110.)
Co	ertificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have received an	nd read the attached notice, as required by § 342(b) of t	he Bankruptcy Code.
Rudnicki, Christine m. & rudnicki, arthur j,	X /s/ Christine m. Rudnicki	2/03/2017
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X /s/ arthur j, rudnicki	2/03/2017
	Signature of Joint Debtor (if any)	Data

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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